

Ebenezer United Methodist Church

1781 E. CR 850 N. Shelburn, IN 47879 church: 812-696-2239

pastor cell: 812-607-0622 pastor e-mail: jeff.blansett@inumc.org

April 16th, 2015

Division of Fire & Building Safety 402 W. Washington St., Rm W246 Indianapolis, IN 46204

To Whom It Concerns,

Following a recent inspection of our Motiva VWL elevette, Ebenezer United Methodist Church was cited for not having a 5-year test of said unit on file. Ebenezer UMC was given "10 days to comply or risk being sealed out of service." We are filing a formal appeal on this matter.

Ansi A18.1 10.3.3.1 states.." type A, B, and C safeties and their governors shall be tested with a rated load." We appeal the requirement for a full load test on our roped hydraulic wheel chair lifts as they do not have a governor to be tested or that can be hand-tripped to initiate this test. Furthermore this is a roped hydraulic system so it does not have a brake to be weight-tested nor does it have coated ropes to be monitored.

We currently perform an annual safety test on these units, and that will continue to be provided.

We also have quarterly inspections provided by a licensed elevator contractor that includes inspection of the ropes and the hydraulics.

Please rescind the standing citation for a full load safety test on unit #46968.

Thank you in advance for your prompt attention to this matter.

Sincerely yours,

Jeffrey A Blansett

Pastor, Ebenezer UMC

REPORT OF INSPECTION
State Form 28645 (R8 / 03-06)
Approved by State Board of Accounts, 2006
INDIANA DEPARTMENT OF HOMELAND SECURITY

DIVISION OF FIRE & BUILDING SAFETY DIVISION OF ELEVATORS

402 W. Washington St., Rm. W246, Indianapolis IN 46204 Telephone Number (317) 232-2670 Fax:(317) 232-6609 E-mail: elevamuse@dhs.in.gov http://www.in.gov/dhs/fire

State number 49698	er	Location of address (number and street) 4662 W COUNTY ROAD 850 N									
Name of owner EBENEZER UMC											
Name of user						User city SHELBURN					
Address of owner (street and number) 1781 E CO RD 850 N						User address 4662 W COUNTY ROAD 850 N					ZIP code 47879
City SHELBURN						User county 77 : SULLIVAN					
State IN				Zip code 47879		Last 5 year test	Next 5 year	test	Inspect E-10	or district	
Floors 4		Manufacturer MOTIVA		Type VWL		Control KCP	Capacity			rrent inspection date Time /31/2015 05:28 PM	
Inspection Type PERIODIC				Sprinklers Yes	1	Last annual test 01/09/2015				Next inspection date 03/30/2016	
CODE VIOLATIONS TO BE CORRECTED											
1 10.3.3	.з	Applicable 5 year test required / ASME A 18.1a/no 5 year test on record as of acceptance test yr 2000									
		10 days to comply or risk t	eing sealed out o	of service							
Additional remarksContractor Details:THYSSENKRUPP,INDIANAPOLIS											
Inspector QEI Number				Receiver of report					Telephone number (812) 397-2851		
RANDALL			1494								
IF VIOLATIONS ARE LISTED ABOVE, PLEASE READ THIS: This inspection Report provides you with a notice of any violations that were observed by the Division of Fire and Building Safety inspector. If: (1) these violations are corrected; (2) a duly authorized representative of the owner certifies below that the violations have been corrected; and (3) the Division of Fire and Building Safety receives a copy of this certification and the inspection report within 30 days of this inspection, this will be taken into consideration when the Division determines whether enforcement order will be issued; and if an enforcement order is issued, timely voluntary compliance may result in a reduced or no monetary penalty. If the Division does not receive thus certified inspection Report within the above-specified number of days, the Division will issue an enforcement order addressing these violations. An enforcement order may impose a number of different sanctions which could include a penalty of up to \$250 per day for each violation. The undersigned attests, subject to the penalties for perjury, that he/she is the owner of the elevator, or that he/she is the properly authorized representative, agent, member or officer of the owner and hereby certifies, subject to the penalties of perjury, that all the violations listed on this inspection Report have been corrected.											
Signature			С	Date	Printe	nted Name			Title		



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Please be advised that if you desire administrative review of this action, you must file a written petition for review at the above address with the Division of Elevator Safety identifying the matter for which you seek review no later than eighteen (18) days from the date of this letter, unless such a date is a Saturday, Sunday, or legal holiday under State Statute, or a day that this office is closed during regular business hours. If you do so, your petition for review will be granted and an administrative proceeding will be conducted by an administrative law judge of the Fire Prevention and Building Safety Commission. If you do not file a petition for review, this action will be final.

Please be further advised that you may request an opportunity to informally discuss this matter prior to filing a petition for review. Such an informal discussion or request however, does not extend the deadline for filing a petition for review, and therefore any request should be made promptly, preferably by telephone. Our telephone number is (317) 232-2670.